

Lincoln Police Department Thomas K. Casady, Chief of Police 575 South 10th Street Lincoln. Nebraska 68508

402-441-7204 fax: 402-441-8492



MAYOR COLEEN J. SENG

www.ci.lincoln.ne.us

April 6, 2004

Mayor Seng and City Council City of Lincoln City County Building Lincoln, NE

Mayor Seng and Members of the City Council:

An investigation has been made regarding the application of Granite City Food & Brewery, 6150 'O' Street requesting a class C/L liquor license.

Granite City Food & Brewery will be a restaurant and brewery which will employ approximately 160 persons.

Granite City Food & Brewery has requested that Barry Pointer be approved as the manager of the liquor license.

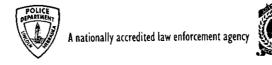
Background information on the applicant is as follows:

Barry Pointer was born in Ft. Scott, Kansas. He attended Pleasanton High School graduating in 1986. Mr. Pointer was the owner/operator of the Sonic Drive In, in Lincoln, Nebraska 1994 – 2002.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police

The Llung



Liquor License Investigation
Business (DBA) GRAN, te C, ty
Manager Owner Other
Name: Barry Pointer
US Citizen? Yes No
Has applicant ever been cited for liquor law violations? (No) Yes Explain
Does applicant have an interest in another liquor license? (No Yes Explain
Is spouse qualified to hold a license? Yes No N/A
How is applicant if not an owner to be paid? (Salary Hourly
How many hours will applicant be at the establishment?557
Any other employment (No) Yes, explain
Any previous experience with a liquor license? Yes
Any criminal convictions ? No Yes Comments
Is applicant a property owner in Lincoln? Yes No
Is applicant involved in any civil litigation? No Yes Comments
(4) Photo (4) Records Check (1) References
Comments
Interview Date 4/6/04

TATE OF NEBRASKA

4-19-04 @130



Mike Johanns Governor

> City Clerk of Lincoln City/County Building 555 S 10 Street Lincoln, NE 68508

Dear Local Governing Body:

CITY OF LINCOLA

March 39 52004

OTTY CLERK'S OFFICE NEBRASKA LIQUOR CONTROL COMMISSION
Hobert B. Rupe Hobert B. Rupe 104 MAN 30 Fil 3 20

Executive Director

301 Centennial Mall South, 5th Floor

P.O. Box 95046 Lincoln, Nebraska 68509-5046 Phone (402) 471-2571

Fax (402) 471-2814

TRS USER 800 833-7352 (TTY) web address: http://www.nol.org/home/NLCC/

A4-033876
47
GRanite City Food & Brewery
6150 O Street
Wass C. ; &

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission (§53-1) 134). You may choose NOT to make a recommendation of approval or denial to our Commission.

PER §53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

- There is a recommendation of denial from the local governing body, 1)
- A citizens protest; or 2)
- Statutory problems that the Commission discovers. 3)

PLEASE NOTE A LICENSEE MUST BE "PROPERLY" LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS, AND A LICENSE IS EFFECTIVE:

- Upon payment of the license fees; 1)
- Physical possession of the license; 2)
- Effective date on the license. 3)

Sincerely,

Jackie B. Matulka NEBRASKA LIQUOR CONTROL COMMISSION

Jackie B. Matulka Licensing Division

Enclosures

Rhonda R. Flower Commissioner

Bob Logsdon Chairman

An Equal Opportunity/Affirmative Action Employer

R.L. (Dick) Coyne Commissioner

> FORM 35-4001 REV. 12/99

APPLICATION FOR LICENSE

Nebraska Liquor Control Commission PO Box 95046, 301 Centennial Mall South Lincoln, NE 68509-5046

RECEIVED http://www.nol.org/home/NLCC

Phone: (402) 471-2571 Fax: (402) 471-2814

MAR 18 2004

NEBRASKA LIQUOR

INSTRUCTIONS: Include: 1. Applicable fees payable to Liquor Control Commission 2. Copy of birth certificate or naturalization papers proving U.S. citizenship for each individual and spouse named on application (not required of corporations or spouse(s) who file an affidavit of no interest with application, Commission form 4178 3. Corporations must include copy of articles of incorporation as filed with the Secretary of States office in the state of Nebraska 4. Commission checklist, form 4251 5. Fingerprint cards and processing fees (are required of individuals, all partners and spouses. Corporate applicants must file for CEO/Manager & stockholders holding over 25% stock 6. All applications must be typewritten or printed clearly 7. Submit in Triplicate 8. Required areas marked by a red asterisk (*)

CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND LIST OF FEES FOR EACH

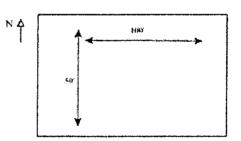
Class of License (Check applicable class) *	Registration Fee	License Fees	Corporate Surety Bond
A Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected a Local Level	exempt
☐ F Beer, On Sale Only - Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
☐ B Beer, Off Sale Only - Inside/Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
☐ J Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
Spirits, Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
D Spirits, Wine, Beer, Off Sale Only - Inside Corporate Limits	\$45.00	\$150.00	exempt
D1 Spirits, Wine, Beer, Off Sale Only - within extraterritorial zoning jurisdiction	\$45.00	\$150.00	exempt
C Spirits, Wine, Beer On & Off Sale - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
M Bottle Club (Spirits, Wine, Beer, On Sale)	\$45.00	Collected at Local Level	exempt
☐ H Nonprofit Corporation	\$45.00	Collected at Local Level	exempt
K Wine Only, Off Sale	\$45.00	Collected at Local Level	exempt
O Boat	\$45.00	\$50.00	exempt
☐ V Manufacturer of Beer, Wine & Distilled Spirits	\$45.00	Varies \$100 to \$1,000	\$10,000 min.
☐ X Wholesale Liquor	\$45.00	\$500.00	\$ 5,000 min.
☐ W Wholesale Beer	\$45.00	\$250.00	\$ 5,000 min.
Y Farm Winery	\$45.00	\$250.00	\$ 1,000 min.
✓ L Craft Brewery (Brew Pub)	\$45.00	\$250.00	\$ 1,000 min.

TYPE OF APPLICATION *		TE SURETY BOND PRMATION
Type of application being applied for (check appropriate box)	Bond Company - for	Classes L V W X Y only
 Individual License requires Form 1 to be attached. Partnership License requires Form 2 to be attached. Corporate License requires Forms 3 and Manager Application to be attached 	Start Date	and Insurance Compa Bond Number FB7314

SECT	ION A LOCATION INFORM	IATION - Must be comp	leted by all applicants
Trade Name (name of business) Granite City Food & Brewery		Telephone Number a 402-466-1900	t premise to be licensed
1) Street Address of 6150 O Street	f Proposed licensed premise	2) Mailing Address for Commission mailings 5831 Cedar Lake F	
City Lincoln Zip Code 68505	County Lancaster	City Minneapolis Zip Code 55416	County Hennepin

DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED

In the space provided draw the area to be licensed. This should include storage areas, basement, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building in situations where only a portion of the entire bldg. is to be covered by the license. No blue prints will be accepted. Be sure to indicate the direction North and number of floors of the building.



Example: East portion approximately 50' x 100' of main floor of 3 story building plus basement. Approximately 30' x 50' at the East end.

SEE Attached

RECEIVED

MAR 18 2004

NEBRASKA LIQUOR CONTROL COMMISSION

SECTION B OTHER IN			TION
	Yes		Explanation/Comments Note: Only what is visible on screen will be printed
* 1. READ CAREFULLY. Answer completely and accurately. Has anyone who is a party to this application, or their spouse, ever been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law; or a violation of a local law, ordinance or resolution. Include any DWIs or DUIs. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.	Yes	No •	MAR 1 8 2004 NEBRASKA LIQUOR CONTROL COMMISSION
* 2. Are you buying the business and/or assets of a licensee? If yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required).	Yes ()	Хо •	.
* 3. Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license? If yes, attach copy.	Yes	No •	
* 4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.	Yes (No (•)	
* 5. Will any person or entity other than licensee be entitled to a share of the profits of the establishment? If yes, explain.	Yes (No (•)	

* 6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such items and the owner.	Yes ()	No •	
* 7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain?	Yes ()	No •	RECEIVED
* 8. Are the premises to be licensed within 150 ft. of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft. of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Per Sec. §53-177.	Yes (No (•)	NEBRASKA LIQUOR CONTROL COMMISSION
* 9. Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the persons exact duties.	Yes O	No ⊕	
10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the person(s) who will be authorized to write checks and/or make withdrawals on accounts at such institutions.	Pie Ste	erre ever	National Bank e, SD n J. Wagenheim Grant
11. List all past and present liquor licenses held by any person named in this application. Include license holder name, location of license and license number. Also list reasons for termination of any licenses previously held.	MN IA	: ONS : LC3	te City Food & Brewery:
12. List the person who will be the on site supervisor of the business and the estimated number of hours per week such person or manager will be on the premises supervising operations.		-	Pointer

13. List the training and experience of the person listed in #12 above in connection with selling and/or serving alcohol products.		Thru's in L Training: with Granit	owner of Sonic Drive incoln, NE intense 7 week training e CitySEE ATTACHED NAGEMENT PLAN	
14. If the property for which this license is sought is owned, submit a copy of the deed, or proof of ownership, if leased submit a copy of the lease covering the entire license year. (Documents must show title or lease held interest in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed)		LEASE ATTAC	RECEIVED MAR 1 8 2004	
15. When do you intend to open for business?		April 20, 2	NEBRASKA LIQUOR CONTROL COMMISSION	· _ <u> </u>
 List the principal residence for the past 10 y a separate sheet. 				1
NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)	
Steven J. Wagenheim	1991	Present	Golden Valley, MN	
Monica A. Underwood	1992	Present	Richfield, MN	
Timothy R. Cary	1996	Present	New Brighton, MN	
Timothy R. Cary	1991	1996	Roseville, MN	
	:	: 1	• • • •	- 1

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and/or inaccurate.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public. Must be signed by applicant and spouse; if a partnership, all partners and spouses must sign and corporation, all stockholders (holding more than 25% of the stock), officers, directors and spouses must sign. Full names only, initials not acceptable.

Sign here	Sign Here Slever Wagenhaim
Sign Here Inited a hudginder	Sign Here Where CEVED
Sign Here	Sign MAR 1 8 2004
Sign Here	Sign NEBRASKA LIQUOR CONTROL COMMISSION
Subscribed in my presence and sworn to before me this	s/th day of March, 2007
	(SEAL) GRACE ENEBO Notary Public Minnesota My Commission Expires Jan. 31, 2007
In compliance with ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternative format.	Sign here Notary Public Signature
Verif	y & Print form
· · · · · · · · · · · · · · · · · · ·	FORM 35-4010

REV 1/01

Application for Corporate Manager *Must Be A Nebraska Resident* Please submit in Triplicate

	C- 4-ol Commission.	PO Box 95046	
Return to: Nebraska Liqui 301 Centennial	•	509 Web address: http://www.nol.org/hoine/N	ILCC/
Phone: (402) 471-2571	Fax: (402) 471-2814	Web address: actpains and	
Required areas marked by a	red asterisk (*)		
	LIQUOR LICE	NSE INFORMATION	Services and a property of the services of the
Name of Licensed Corpora	tion	Class & License number applied for *	
Granite City Food & Brew er	y Ltd. ★	(**	
Trade Name of Licensed P Grenite City Food & Brewe	remise *		
Street Address of License 6150 O Street	d Premise *	City County Larcaste	# #
On behalf of the corporat	ion, I designate this individ	dual as corporate manager.	
	•	Steven J. Wagantam	
Signature of Corpo	rate President/CEO:		
A PROPERTY OF THE PROPERTY OF	PLICAND INFORM	ATION (MUST BE 21 OR OVER)	
Full Name (Last, First, 1) Pointer, Bo	Middle, Maiden) wry J. +	Sex * Social Security F M C X	Number
Date of Birth	Place of Birth	· KS *	
Home Street Address HHZD Birch Cre	ek Dr. *	City County Lincoln *	coster,
State *	Zip Code	Home Telephone Number 402-471- २ २४-7	
Business Telephone N	umber	Drivers License Number	State NE *

SPOUSE'S INFORMATION (IF NOT MARRIED INDICATE)

Full Name (Last, First, Middle, Maiden) Pointer Dawn Ann BelReld	Social	Security Number	RECEIVED
Drivers License Number	State NC	Date of Birth	MAR 1 8 2004 NEBRASKA LIQUOR CONTROL COMMISSION
Place of Birth Fairhope AC			
* 1. READ CAREFULLY. Answer completely and accurate Has anyone who is a party to this application, or their spous criminal charge. Criminal charge means any charge alleging state law; or a violation of a local law, ordinance or resolution occurred and the year and month of the conviction or pleas application. If more than one party, please list charges by each of the conviction of the co	te, <u>ever</u> been convices a felony or misder on. List the nature of Also list any charge	meanor violation of of the charge, whe es pending at the ti	of a federal or re the charge
* 2. Have you or your spouse ever made application for any YES, for what premise give license number and date. Yes No	y liquor license or r	nanager for any lic	quor license? IF
* 3. Have you or your spouse ever made a compromise sett Yes No	tlement for violation	n of such laws?	
* 4. Do you, as a manager, have all the qualifications requi License? Nebraska Liquor Control Act (§53-131.01) Yes No	red by any person e	entitled to hold a N	Jebraska Liquor
* 5. Have you filed fingerprint cards and PROPER FEES application? Yes No	(if check, make ou	t to the NE State F	Patrol), with this

RESIDENCES SINCE AGE 1	8, AP	PPLICANT AND SPOUSE MUST COMPLETE
		ear To
Applicant: City & State	From	
Spouse: City & State	194	Present
	Ye From	'ear n To
Applicant: City & State	191	िष्य
Lenexa, KS Spouse: City & State Lenexa, KS	92	94
	Y From	lear n To
Applicant: City & State Pittsburg, KS	Me	91
Spouse: City & State Pittsburg, KS	169	192
	Y From	Year n To
Applicant: City & State Pleasanton, KS Spouse: City & State	147	18Le
EMPLOYER	RS - L	IST LAST TWO EMPLOYERS
Name of Employer Sonic Orne-In		Year From To 1994 Zool
Name of Supervisor Self-Employed		Telephone Number
Name of Employer Sonic Druie - IN-WKO		Year From To 1992 1993
Name of Supervisor Tohn King		Telephone Number

PERSONAL OATH AND CONSENT OF INVESTIGATION - MUST BE SIGNED BY APPLICANT & SPOUSE

STATE OF NEBRASKA	A)			
) S	S		
COUNTY OF)			
and/or spouse of applicant that the contents thereof ar	who m nd all st ant(s) s	akes the above and for atements contained the hall be deemed guilty o	th, deposes and states that the undersigned is the applicant regoing application, that said application has been read and erein are true. If any false statement is made in any part of of perjury and subject to penalties provided by law. (Sec.	
kind and description include records, and said applicant against the Nebraska Liqu	ding po and spor Cont ontrol C	lice records, tax record ouse waive any rights or rol Commission and ar ommission. If spouse h	igation of his/her background including all records of every its (State and Federal), and bank or lending institution or causes of action that said applicant or spouse may have ny other individual disclosing or releasing said information has NO interest directly or indirectly, an affidavit may be be filed.	
The undersigned understar application, is subject to ca	nd and a ancellat	acknowledge that any lition if the information o	license issued, based on the information submitted in this contained herein is incomplete and inaccurate.	
			4	
Frau X	1		Dawn A Pourtess	
Signature	of App	licant	Signature of Spouse (if applicable)	
Subscribed in my presence day of Maruh	and sv	worn to before me this	Subscribed in my presence and sworn to before me this	
Zalura J. Notary Sig	<u>Leb</u> nature	& Seal	Jollenn J. Leben Notary Signature & Seal	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Y - State o IA J. LEI Exp. Feb. (BER	GENERAL NOTARY - Slata of Nebraska LAVINA J. LELETORM 85-40 My Comm. Exp. Feb. 20, 2005R EV. 2/4	13 nı
			7 - Z	, 1

Corporation/LLC Application for License - Form 3

Nebraska Liquor Control Commission

RECEIVED

MAR 18 2004

INSTRUCTIONS:

1) Application and application for manager must be typewritten and submitted in triplicate

2) Fingerprint cards (2 cards per person) must be submitted for: a) each stockholder owning over 25% of the stock, b) chief executive officer, c) proposed manager and d) all spouses

3) Information regarding spouses must be completed

NEBRAS	KA LIQU	OR
CONTROL	COMMIS	SION

Required areas marked by a red a	sterisk (*)			schedule		
Required areas marked by a red a Name of Corporation That Will Incorporation Granite City Food & Brewery	Hold License. Attach o	Copy of Articles of Rubines	f gww SWW Total I corpor	Number of Shares (if ation)		
Corporate Street Address 5831 Cedar Lake Road	Mail	ing address for re-		trol Commission Mailings		
Corporate Telephone Number 952-525-2070 *	City Minneapolis *	County Hennepin	State MN *	Zip Code 55416 * -		
Name of Registered Agent CT Corporation		Name of P Barry Poi	roposed Manager nter	*		
IN THIS SECTION LIST THE NAME OF THE CHIEF EXECUTIVE OFFICER						
Name Steven J. Wagenheim	*	Title Presiden	t/CEO **	Date of Birth		
Social Security Number	Home Address (1) 321 Westwood Driv	e North	*	City Golden Valley *		
State Zip Code MN * 55422	*	Home Telephone Number 952-374-2890 *				
PRINCIPLE OFFICERS, DIRECTORS, STOCKHOLDERS, MEMBERS AND SPOUSES						
Name of Officers, Directors, Mer Give Last Name, First Name,		Social Security Number	Date of Birth	Title		
Name Wagenheim, Steven, Jay		:		President/CEO		
Spouse Name N/A		:				
Partner Number of Shares / %		Spouse Number	of Shares / %			
Name of Officers, Directors, Mer	mbers and Spouses.					

Give Last Name, First Name, Middle, Maiden, and any aliases	Social Security Number	Date of Birth	Title
Name Underwood, Monica, Ann, Lynch			Secretary/Interim CFO
Spouse Name Underwood, Jeffery, Paul	<u>.</u>		Route Sale Supervisor
Partner Number of Shares / %	Spouse Number of Shares / %		
Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases	Social Security Number	Date of Birth	Title
Name Cary, Timothy, Randel			COO-Restaurant Ops
Spouse Name Cary, Tiffany, Anne, Wolf			
Partner Number of Shares / %	Spouse Number o	f Shares / %	
Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases	Social Security Number	Date of Birth	Title
Name			
Spouse Name	;		
Partner Number of Shares / %	Spouse Number of	f Shares / %	
Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases	Social Security Number	Date of Birth	Title
Give Last Name, First Name, Middle, Maiden, and		Date of Birth	Title
Give Last Name, First Name, Middle, Maiden, and any aliases Name		Date of Birth	Title
Give Last Name, First Name, Middle, Maiden, and any aliases		Date of Birth	Title

(If Necessary, Continue on Separate Sheet)

Is this Corporation/LLC controlled by another Corporation?

Yes No

Name of control Corporation

If YES, LIST EACH STOCKHOLDER/MEMBER OWNING MORE THAT 25% stock/interest in that corporation/LCC. Any applicant who has a Corporation as a shareholder MUST file an organizational chart listing all shareholders and/or corporations owning more than 25% stock and listing of the percentage of stock owned.

Please indicate below your corporate tax year with the IRS

Starting date: 12/20/03 Ending date: 12/20/00

State of State o

In Compliance with ADA, this form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

Secretary/Member

Verify Form and Print

FORM 35-4183 REV. 02/01